



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Instructions for Filing

Articles of Dissolution for a Domestic Limited Liability Company

[Section 7-16-47](#) of the General Laws of Rhode Island, 1956, as amended

The attached form is designed to meet minimal statutory filing requirements pursuant to the relevant statutory provision. This form and the information provided are not substitutes for the advice and services of an attorney and/or tax specialist.

How to complete the form:

Obtain a [letter of good standing \(LOGS\)](#) issued by the RI Division of Taxation for the purpose of dissolution. You may contact the Division of Taxation at www.tax.ri.gov or (401) 574-8941.

1. List the LLC's ID number. The ID number can be found by looking up your entity in the [Corporate Database](#).
2. List the name of the LLC as written on your Articles of Organization. The entity name can be verified through our [Corporate Database](#).
3. List the date the original Articles of Organization were issued. You can find the filing in the [Corporate Database](#).
4. List the dates of filing for any amendments to the Articles, or the most recent restatement and all subsequent amendments, if any.
5. State the reason for filing the Articles of Dissolution.
6. List any other information or provision, not inconsistent with the law, which the members or authorized person signing the Articles of Dissolution elect to set forth. *This is optional.*
7. As required by RIGL [7-16-8](#), the entity has paid all fees and franchise taxes. RI Division of Taxation **original** LOGS must accompany this form. The LOGS must be dated within **thirty days** of the dissolution file date.
8. Check "Date received" unless you prefer that the Certificate goes into effect at a date certain when the form is received in this office.
9. An Authorized Person **MUST** sign and date this form.

How to pay the filing fee:

The filing fee is \$50, payable either in person via cash, credit card, or check at the Business Services Division, or by mail to the Business Services Division via check payable to RI Department of State.

How to confirm your filing:

Corporate entity records are retrievable and viewable through our website. Successful filings will not result in a mailed confirmation. Filings that cannot be processed will be posted [online](#) and then returned. To confirm your submission and obtain evidence of your filing:

- Log on to the [Corporate Database](#)
- Enter the name or ID number of your entity and click "Search"
- Click on the link to your entity record, scroll down, select "All Filings" and then "View Filing"
- Identify desired type of filing and click on "PDF" under "Files" to view and print the record
- Filing rejections can be viewed online, via our [Rejected Filings Viewer](#)



Articles of Dissolution

DOMESTIC Limited Liability Company

→ Filing Fee: \$50.00

STAMP

FOR
SECRETARY OF STATE
USE ONLY

Pursuant to the provisions of RIGL [7-16-47](#), the undersigned hereby submits the following Articles of Dissolution:

1. Entity ID Number:	2. The name of the limited liability company is:
3. The date of filing of its original Articles of Organization was:	
4. The dates of filing of all amendments to the original Articles of Organization or the most recent restatement, if any, and all subsequent amendments thereto:	
5. The reason(s) for filing the Articles of Dissolution are:	
6. State any other information or provision, not inconsistent with law, which the members or authorized person signing the Articles of Dissolution elect to set forth:	
7. As required by RIGL 7-16-8 , the entity has paid all fees and franchise taxes. RI Division of Taxation's ORIGINAL letter of good standing (LOGS) for the purpose of dissolution MUST accompany this form.	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

STAMP

FOR
SECRETARY OF STATE
USE ONLY

8. Date when these Articles of Dissolution will be effective: **CHECK ONE BOX ONLY**

☐ Date received (Upon filing)

☐ Effective date (which shall be a date certain) _____

Under penalty of perjury, I declare and affirm that I have examined these Articles of Dissolution, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of LLC

Date

Signature of Authorized Person

SIGN DOCUMENT HERE



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Filer Contact Information

In the event our office needs more information in order to complete the filing of this document, we ask for the filer's contact information. **All fields are REQUIRED.**

Name:		Date:
Entity Name:		
Street Address:		
City:	State:	Zip Code:
Email Address:		Phone Number: